



Beverly Brandt, Chief
Bureau of Health Facilities and Services Development

First and foremost, Interim/LNG wants to thank you and your staff for your patience, guidance and dedication through this CON process. What an honor it was to present along with all the great companies who are also dedicated to wanting to serve the residents of Beaufort County. Thank you for the opportunity to recap some of what was touched on during project review. The following will outline Why Interim!

Compliance with the South Carolina Health Plan.

I would like to address Mr. Les Shelton's question regarding underutilization of home health care in Beaufort County. Interim/LNG believes that the biggest obstacle to home health services is companies not accepting **all** patients, **all** payers. Home health services should be available to all persons that qualify from the tiniest of preemies, to the eldest of seniors. Medicare is the largest payer of home health services, but there are others including but not limited to; Medicaid, commercial insurance, workers compensation, infusion companies, and private pay. DHEC Regulation Number 61-77 Standards for Licensing Home Health Agency does not define home health services by payer or age. Interim/LNG believes that the best application does not give reasons why they cannot service patients, but rather why they can service patients. This means putting in the hard work to overcome obstacles like low reimbursement, qualified staff, distance, and language barriers. Interim/LNG did not start out to be known as the "pediatric provider," but we are definitely proud of the decision we made to take on a population of patients that were being underserved. Our motto for every challenge we take on is---If it were easy everyone would do it!!

Community Need Documentation

Interim/LNG proposes exceeding the State Health Plan need of 101 patients during our first year of operation. We took into consideration the 2010 census that showed a larger population increase than projected in Beaufort County, and the belief that the number of pediatric patients will be substantially higher, **as we intend on marketing these services.** For the geographical areas of the county that are underserved we intend to offer a solution in the form of the "Interim fleet". Miss Brandt asked questions regarding how the fleet was used. Interim/LNG purchased vehicles to solve the problem of access to care. The fleet is one of many tools we use to assure that all patients are seen no matter how rural an area they live. Nurses tend to accept cases that require a longer driving distance if they are able to use a company vehicle and company gas. The other tool is to have our Director of Health Care Services also be qualified to see patients. This allows us to always have an available nurse since patient's need's can be immediate. Additionally, we already care for private duty needs of the residents of Beaufort County and have current clients in Port Royal, St. Helena, Beaufort, Bluffton and Hilton Head. We have real life experience in providing home care in Beaufort County, and know how to overcome the challenges of traffic, bridges and barriers that other companies may not have ever encountered. Being locally owned and operated gives owners, Paula and Dawn, the advantage of being directly involved in the communities they are serving; it allows them to make changes and adjustments immediately after recognizing barriers to patient care.

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Acceptability

Interim/LNG submitted 118 letters of support obtained from physicians with varying specialties (including pediatricians). Letters were also obtained from infusion companies, insurance companies, workers comp, geriatric care managers, wealth managers, hospice providers, assisted living facilities as well as many others. Interim/LNG took the time to show the board that we have the means and the desire to market to a variety of potential referral sources, and assure all patients has access to service. Interim/LNG understands that the board will consider opposition to our proposal. Our only comment on the other applications is that we believe that as outlined by the State Health Plan, the CON is intended to be awarded to a company that can provide **home health services**. Many other applicants have a vast array of knowledge and experience in everything from hospice to assisted livings to hospital and physician based services. We acknowledge this gives them an immediate referral base as they can cross refer from one service line to another. However, it doesn't necessarily lend itself to focusing on what the State intended the CON to address, which is the underutilization of home health services, and the need for an additional provider of those services. Interim/LNG is first and foremost a home care provider. It is our intention to safely manage patients wherever they reside. We are absolutely committed to networking with Hospitals, Hospices, DME companies, and assisted and long term care facilities so that we may better coordinate the continuing care needs of our patients. Again it is Interim/LNG's thoughtful consideration about what this CON project is supposed to accomplish, additional home health services, that leads us to not oppose the other applicants, but merely state that we believe our application is the most comprehensive that will extend care to the most diverse set of patients and payers.

Distribution (Accessibility)

Interim/LNG does not believe that there are duplications of services proposed in our application. In fact, by offering pediatric home health, we believe we cover a disadvantaged group and lessen the chances of duplication in the event that the CON is awarded to a company that does not cover the 18 and under demographic. Therefore; a pediatric CON will be sought to service those patients. We also propose accepting the largest percentage of Medicaid. Interim/LNG already having a private duty agency providing home care in Beaufort County, is only asking to expand what they are providing so that they may fully meet the ongoing changing needs of their existing patients, as well as service all those requiring in home care. The issue of office location seemed to come up a lot during project review with companies giving a wide array of answers to why and how they made the decision about office placement. The office location is important for an array of other reasons that do not involve direct patient care. Interim/LNG stands behind our decision to run two offices. One in Ridgeland, and one in Bluffton. Our experience has shown us that many of our home health patients will be coming from a hospital or facility setting. This is why it was important that our offices be within reasonable distance of local hospitals. For us one of the most important steps is the **discharge planning process**. Interim/LNG believes that whenever possible we should be meeting the patient, case managers and doctors before the patient discharges. This does two things; gives peace of mind to patient and families about who will be coming to their home, and secondly reduces the chances of miscommunication about the needs of the patient once they've left the hospital setting. Our focus will be on patient and family education to lessen the possibility of readmissions and assure a successful transition to home. Another important function of a local office is investing in the community being served. Lastly, Interim/LNG has recognized that most of our staff comes from hospitals and facilities, so having offices within reasonable distance of those hospitals and facilities makes good recruitment/retention sense. Interim/LNG understands the needs of a large county. As stated earlier we are already providing services to residents in all areas of Beaufort County. From our experience, we know that our staff providing care will not reside in the neighborhoods or communities they service. (Example: Many communities like Sun City require a resident to be 50 or over, and our typical home health nurse is 28-40yoa). Being locally focused, we can

make the decision to open new office locations as we determine they are needed. This is what is unique about Interim/LNG's local ownership.

Medically Underserved Groups

Interim/LNG did the best job in meeting these criteria. First, we promise every payer and every patient because from our experience it is the children, disabled adults on Medicaid, and ethnic minorities who are not fully served due to reasons that range from no qualified or bilingual staff to unacceptable reimbursement rates. There are several factors that make home care in general a tough business, but we are in the business to provide care. The staff at Interim/LNG looks for every opportunity to service those not receiving care. This is most evident in the fact that we were the first to apply for, and receive the pediatric CON. The Medicaid population, whether it is a child or an adult, deserves access to care. Interim/LNG believes that by accepting the most diverse amount of payers possible we are able to offset fluctuations in any one line of revenue. Our payer mix is 73% Medicare, 16% Medicaid, and 11% commercial insurance and private pay. This commitment to all payer types is most evident when you see that Interim/LNG projects taking the largest percentage of Medicaid than all other applicants. In our experience, children, disabled and Hispanic patients are being covered by Medicaid.

Record of Applicant

Interim/LNG believes that Dawn Costanzo, RN and Paula Tharp have demonstrated that they have the management experience to ensure that this proposal is successful and meets the needs of the residents of Beaufort County. Interim/LNG is nationally recognized and locally focused. Dawn and Paula have been providing home care to seven (7) counties in South Carolina since 2006. Through good quality practices and care, they received **CHAP accreditation** in 2007. Wanting to stay engaged and moving forward in their communities, they applied for and received Pediatric CON's in Berkeley, Dorchester and Charleston Counties. They are committed to growing in the State of South Carolina and are invested in its people. By being part of the family of Interim HealthCare, they are able to tap into resources that keep them up to date and well versed in all clinical and management aspects of the ever growing changing world of health care. No better example of a growing, thriving Interim HealthCare than the Interim in Greenville, SC that in 2009 serviced 8,732 persons in six (6) counties.

Financial Feasibility

Interim/LNG submitted a three (3) year projected budget that clearly shows long term financial feasibility. As talked about in earlier comments, Interim/LNG believes that accepting a diverse amount of payers will help us through any fluctuations with any one payer source. By running the pediatric business in the Tri County, Interim/LNG is very comfortable with running and budgeting on the lower reimbursements of Medicaid. Long term viability is also our concern. We believe in diversity of payer and patients in assuring that Interim/LNG will continue to be part of the Beaufort County Community. Once we are awarded the CON we will be providing the full continuum of home care services that will be an attractive option to patients and referral sources.

Again from all of us at Interim/LNG we thank Miss Brandt and the staff for all the time, effort and energy put into this process. It has been a great experience for us as we are so passionate about how we can grow and care for our communities and live the Interim motto, "When it matters most, count on us."

Thank you,

Paula Tharp
Interim HealthCare

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